ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	1035	, , , , ,
O.I.P.E. CLASSIFIER	3-7		1/2
FORMALITY REVIEW	you. 40.	7/16.28	8-9-00
RESPONSE FORMALITY REVIEW	74.W.	171625	3-12.00

INDEX OF CLAIMS

Rejected	N
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 (Through numeral) Canceled 	A Appeal
÷ Restricted	O Objected

÷ Restricted 0					
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If more than 150 claims or 10 actions staple additional sheet here

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